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FEE TRANSMITTAL FOR FY 2009  Applicant claims small entity status. See 37 CFR 1.27  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  (b) 130.00  Attomey Docket No.  Attomey Do			Complete if Known						
FIGH Named Inventor  Applicant claims small entity status. See 37 CFR 1.27  AT Unit  Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  (\$) 130.00  Attorney Docket No. 4918-0102PUS1  METHOD OF PAYMENT (check all that apply)  Check Credit: Card Money Order None Other (gleave identify):  X Deposit Account Deposit Account Number: 02-2448  Deposit Account Name, Birch, Slewert, Kolasch & Birch, LIP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below Charge arry additional fee(s) or underpayments of lea(s) indicated below, except for the filling fee  X Charge arry additional fee(s) or underpayments of lea(s) indicated below, except for the filling fee  X Charge arry additional fee(s) or underpayments of lea(s) indicated below, except for the filling fee  X Charge arry additional fee(s) or underpayments of lea(s) indicated below, except for the filling fee  X Charge arry additional fee(s) or underpayments of lea(s) indicated below, except for the filling fee  X Charge fee(s) indicated below, except for the filling fee  X Charge fee(s) indicated below, except for the filling fee  X Charge fee(s) indicated below, except for the filling fee  X Charge fee(s) indicated below, except for the filling fee  X Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Seal Individual Fee (s)		Application Number 10/53		10/534,459-Co	534,459-Conf. #6940				
Applicant claims small entity status, See 37 CFR 1.27   Art Unit   1795	I FEE T	Filing Date		May 11, 2005					
Application Type	For EV 2009								
METHOD OF PAYMENT (check all that apply)	101112003			Examiner Nam	ie	P. N. Thompson Rummel		·	
METHOD OF PAYMENT (check all that apply)	Applicant claims small entity status. See 37 CFR 1.27			7 tt Offit			1795		
Check Credit Card Money Order None Other (please identify):    X   Deposit Account   Deposit Account Number   O2-2448   Deposit Account Name   Birch, Slewart, Kolasoh & Birch, LLP	TOTAL AMOUNT OF F	Attorney Docket No. 4918-0102Pt			S1 ———				
Poposit Account   Deposit Account Number   Deposit	METHOD OF PAYMENT (check all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filling fee  X Charge any additional fee(s) or underpayments of  X Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity Application Type Fee (\$)	Check Credit Card Money Order None Other (please identify):								
X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   X   Charge any additional fee(s) or undergrayments of   X   Credit any overpayments	x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   FEE CALCULATION	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Telephone   Tele	X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Search   S	Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
Papelication Type	FEE CALCULATION								
Paper   Pap	· · · · · ·								
Page	·								
Design   220   110   100   50   140   70	Application Type	<u>Fee (\$)</u>					Fees Paid (\$)		
Plant   220   110   330   165   170   85	Utility	330	165 540	270	220	110			
Reissue 330 165 540 270 650 325  Provisional 220 110 0 0 0 0 0 0  2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  3 a or HP = makes and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month  Registration No. (Altonney/Agent) 32,181 Telephone (703) 205-8000	Design	220	110 100	50	140	70			
Provisional   220   110   0   0   0   0   0   0   0   0	_	220	110 330	165	170	85			
Signature   Sig	Reissue	330	165 540	270	650	325			
Fee (S)   Fee (S)   Fee (S)   Fee Paid (S)   Fee (S)   Fee Paid	Provisional	220	110	0	0	0			
Each claims over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  A or HP = x =  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1251 Extension for response within first month  Registration No. (Altorney/Agent)	2. EXCESS CLAIM FEES Small Entity								
Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  X  Extra Claims  X  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  AOTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1251 Extension for response within first month  Registration No.  (Altomey/Agent)  Registration No.  (Altomey/Agent)  Registration No.  (Altomey/Agent)  Registration No.  (Altomey/Agent)  Telephone  (703) 205-8000	ree Description								
Multiple dependent claims  Total Claims 22 22 - or HP x = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims 3	· · · · · · · · · · · · · · · · · · ·							26	
Total Claims  22 22 - or HP	· · · · · · · · · · · · · · · · · · ·								
Pee   See   Paid   See   See   Paid   See   Paid   See   Paid   See   Paid   See   Paid   See   See   Paid									
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims	00								
Indep. Claims			x = if greater than 20.	· · · · · · · · · · · · · · · · · · ·	. 1	Fee (\$)	ree Paid (\$	1	
3 3- or HP =   x   =   HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets									
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 =	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
- 100 =	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month  SUBMITTED BY Signature Registration No. (Attorney/Agent) 32,181 Telephone (703) 205-8000	<u> </u>								
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filling surcharge): 1251 Extension for response within first month  SUBMITTED BY  Signature  Registration No. (Attorney/Agent) 32,181 Telephone (703) 205-8000									
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Signature Registration No. (Attorney/Agent) 32,181 Telephone (703) 205-8000	Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00								
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